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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PA-9816
First Named Inventor	Storey
COMPLETE IF KNOWN	
Application Number	09 / 674,616
Filing Date	1-Nov-2000
Group Art Unit	To be assigned
Examiner Name	To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Labelled Glutamine and Lysine Analogues

the specification of which (Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) **11/01/2000** as United States Application Number or PCT International

Application Number **09/674,616** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
98303872.0	EP	05/15/1998	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/GB99/01550	05/14/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to receive notices from the Patent and Trademark Office connected therewith:

☒ Customer Number 22840

OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 22840 OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname	
Anthony Eamon		Storey	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Post Office Address			
Post Office Address			
City	State	ZIP	Country

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Marivi

Mendizabal

Inventor's
Signature

Marivi Mendizabal

Date

21 Nov 2000

Residence: City

State

Country

GB

Citizenship

ES

Post Office Address

56 Springfield Avenue, Merton Park, London

Post Office Address

Greater London SW20 9JX Great Britain

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Susan

Champion

Inventor's
Signature

Susan Champion

Date

22 Nov 2000

Residence: City

State

Country

GB

Citizenship

GB

Post Office Address

20 LINDO CLOSE, CHESHAM
68 GROVE GARDENS, TRING
HERTS. HP23 5PY

Post Office Address

Buckinghamshire HP5 2JP Great Britain

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Alex

Gibson

Inventor's
Signature

Alex Gibson

Date

22 Nov 2000

Residence: City

State

Country

GB

Citizenship

GB

Post Office Address

24 Farm Close, Little Chalfont
67 Drovers Court, Troy Close
Oxford, Oxfordshire

Post Office Address

Buckinghamshire HP6 6RH Great Britain

City

State

ZIP

Country

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Benedicte

Guilbert

Inventor's
Signature

X *Benedicte*

Date X 22/11/00

Residence: City

State

Country

GB

Citizenship

FR

Post Office Address

4 HILBERRY CLOSE, WATFORD
14 Chesswood Court, Bury Lane, Rickmansworth

Post Office Address

Hertfordshire WD3 1DF Great Britain
WD1 3UZ

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Ian Andrew

Wilson

Inventor's
Signature

X *Ian Wilson*

Date X 22/11/00

Residence: City

State

Country

GB

Citizenship

GB

Post Office Address

18 Sturrock Way, Hitchin

Post Office Address

Hertfordshire SG4 0EP Great Britain

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Peter

Knox

Inventor's
Signature

X *Peter Knox*

Date

Residence: City

State

Country

GB

Citizenship

GB

Post Office Address

"Choppings", 34 Kings Road, Chalfont St. Giles

Post Office Address

Buckinghamshire HP8 4HS Great Britain

City

State

ZIP

Country

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DECLARATION

ADDITIONAL INVENTOR(S)
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Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Benedicte		Guilbert			
Inventor's Signature				Date	
Residence: City	State	Country	GB	Citizenship	FR
Post Office Address	14 Chesswood Court, Bury Lane, Rickmansworth				
Post Office Address	Hertfordshire WD3 1DF Great Britain				
City	State	ZIP	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Ian Andrew		Wilson			
Inventor's Signature				Date	
Residence: City	State	Country	GB	Citizenship	GB
Post Office Address	18 Sturrock Way, Hitchin				
Post Office Address	Hertfordshire SG4 0EP Great Britain				
City	State	ZIP	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Peter		Knox			
Inventor's Signature	<i>Peter 16</i>			Date	27.11.00
Residence: City	State	Country	GB	Citizenship	GB
Post Office Address	"Choppings", 34 Kings Road, Chalfont St. Giles				
Post Office Address	Buckinghamshire HP8 4HS Great Britain				
City	State	ZIP	Country		

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